

County: St. Croix
MAPLE MANOR HEALTHCARE CENTER
505 WEST 8TH STREET

NEW RICHMOND 54017 Phone: (715) 246-6851
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 61
Total Licensed Bed Capacity (12/31/01): 64
Number of Residents on 12/31/01: 41

Facility ID: 5370

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Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 43

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		29.3
Supp. Home Care-Personal Care	No					1 - 4 Years		58.5
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.3	More Than 4 Years		12.2
Day Services	No	Mental Illness (Org./Psy)	7.3	65 - 74	4.9			-----
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	39.0			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	39.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.4	95 & Over	9.8	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	4.9		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	2.4		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	51.2	65 & Over	92.7	-----		
Transportation	No	Cerebrovascular	9.8		-----	RNs		10.9
Referral Service	No	Diabetes	2.4	Sex	%	LPNs		10.2
Other Services	No	Respiratory	0.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	19.5	Male	29.3	Aides, & Orderlies		
Mentally Ill	No		-----	Female	70.7			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Per Di em (\$)	Total Resi - dents	% Of All
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	No.	%				
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	0.0
Skilled Care	2	100.0	220	29	85.3	105	0	0.0	0	4	80.0	134	0	0.0	0	0	0.0	35	85.4
Intermediate	---	---	---	5	14.7	88	0	0.0	0	1	20.0	134	0	0.0	0	0	0.0	6	14.6
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	2	100.0		34	100.0		0	0.0		5	100.0		0	0.0		0	0.0	41	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	10.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	2.4	80.5	17.1	41
Other Nursing Homes	1.4	Dressing	17.1	73.2	9.8	41
Acute Care Hospitals	84.3	Transferring	51.2	41.5	7.3	41
Psych. Hosp. -MR/DD Facilities	2.9	Toilet Use	31.7	56.1	12.2	41
Rehabilitation Hospitals	0.0	Eating	65.9	31.7	2.4	41
Other Locations	1.4	*****				
Total Number of Admissions	70	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	2.4	Receiving Respiratory Care		2.4
Private Home/No Home Health	20.8	Occ/Freq. Incontinent of Bladder	56.1	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	5.6	Occ/Freq. Incontinent of Bowel	31.7	Receiving Suctioning		0.0
Other Nursing Homes	4.2			Receiving Ostomy Care		2.4
Acute Care Hospitals	37.5	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	2.8	Physically Restrained	0.0	Receiving Mechanically Altered Diets		0.0
Rehabilitation Hospitals	0.0					
Other Locations	2.8	Skin Care		Other Resident Characteristics		
Deaths	26.4	With Pressure Sores	0.0	Have Advance Directives		100.0
Total Number of Discharges (Including Deaths)	72	With Rashes	0.0	Medications		
				Receiving Psychoactive Drugs		53.7

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities % Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	66.5	82.7 0.80	85.1 0.78	84.3 0.79	84.6 0.79
Current Residents from In-County	85.4	82.1 1.04	80.0 1.07	82.7 1.03	77.0 1.11
Admissions from In-County, Still Residing	12.9	18.6 0.69	20.9 0.61	21.6 0.60	20.8 0.62
Admissions/Average Daily Census	162.8	178.7 0.91	144.6 1.13	137.9 1.18	128.9 1.26
Discharges/Average Daily Census	167.4	179.9 0.93	144.8 1.16	139.0 1.20	130.0 1.29
Discharges To Private Residence/Average Daily Census	44.2	76.7 0.58	60.4 0.73	55.2 0.80	52.8 0.84
Residents Receiving Skilled Care	85.4	93.6 0.91	90.5 0.94	91.8 0.93	85.3 1.00
Residents Aged 65 and Older	92.7	93.4 0.99	94.7 0.98	92.5 1.00	87.5 1.06
Title 19 (Medicaid) Funded Residents	82.9	63.4 1.31	58.0 1.43	64.3 1.29	68.7 1.21
Private Pay Funded Residents	12.2	23.0 0.53	32.0 0.38	25.6 0.48	22.0 0.55
Developmentally Disabled Residents	0.0	0.7 0.00	0.9 0.00	1.2 0.00	7.6 0.00
Mentally Ill Residents	7.3	30.1 0.24	33.8 0.22	37.4 0.20	33.8 0.22
General Medical Service Residents	19.5	23.3 0.84	18.3 1.06	21.2 0.92	19.4 1.01
Impaired ADL (Mean)	39.0	48.6 0.80	48.1 0.81	49.6 0.79	49.3 0.79
Psychological Problems	53.7	50.3 1.07	51.0 1.05	54.1 0.99	51.9 1.03
Nursing Care Required (Mean)	0.6	6.2 0.10	6.0 0.10	6.5 0.09	7.3 0.08